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FITZPATRICK (30 ROCKEFELLE NEW YORK, NY	and the second s	SCINTON P	E 4868	Ce I hereby certify that the States Postal Service addressed to the Ma	rtificate of Mailing or Tran his Fee(s) Transmittal is bein with sufficient postage for fi il Stop ISSUE FEE addres	smission ng deposited with the United rst class mail in an envelope s above, or being facsimile date indicated below.
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APPLICATION NO.	APPLICATION NO. FILING DATE		FIRST NAMED INVENTOR		ATTORNEY DOCKET NO.	CONFIRMATION NO.
09/523,313	09/523,313 03/10/2000		Tony Gerard Rose		1263.0805	5129
TITLE OF INVENTION: D	ATA DISPLAY APPARAT	US AND DATA I	DISPLAY MI	ETHOD		
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APPLN. TYPE	SMALL ENTITY	ISSUE FEE		PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$140	0	\$0	\$1400	01/05/2006
EXAMINER		ART UNIT		CLASS-SUBCLASS]	•
FILIPCZYK	.2161		707-001000	_		
1. Change of correspondence	e address or indication of "F	ee Address" (37	2. For pri	nting on the patent front page, li	st	
CFR 1.363). ☐ Change of correspondence address (or Change of Correspond Address form PTO/SB/122) attached.			(1) the names of up to 3 registered patent attorneys or agents OR, alternatively,			
"Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Cus			registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is			
Number is required.			listed, no	name will be printed.		
	RESIDENCE DATA TO B				*	· · · · · · · · · · · · · · · · · · ·
PLEASE NOTE: Unless recordation as set forth in	an assignee is identified be 137 CFR 3.11. Completion	clow, no assignee of this form is NO	data will app T a substitute	pear on the patent. If an assign for filing an assignment.	nee is identified below, the o	locument has been filed for
(A) NAME OF ASSIGNEE			(B) RESIDENCE: (CITY and STATE OR COUNTRY)			
CANON KABI	USHIKI KAISH	A	TOK	YO, JAPAN		
Please check the appropriate	assignee category or catego	ries (will not be pr	inted on the p	patent): 🔲 Individual 🚨 Co	orporation or other private gr	oup entity Government
4a. The following fee(s) are	enclosed:	4t	. Payment of	• • •		
Issue Fee			A check in the amount of the fee(s) is enclosed.			
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Advance Order - # of	Copies 5		Deposit Acc	ector is hereby authorized by clount Number $0.6-1.205$	harge the required fee(s), or enclose an extra c	credit any overpayment, to
5. Change in Entity Status	(from status indicated above)				
a. Applicant claims Sl	MALL ENTITY status. See	37 CFR 1.27.	b. Applic	cant is no longer claiming SMA	LL ENTITY status. See 37 C	FR 1.27(g)(2).
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Authorized Signature	Elev	1/6	Date 1/4/06			
Typed or printed name _]	Edward A. Km	ett		Registration	No. <u>42,746</u>	
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This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

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